



## **Testimony to the Human Services Committee**

### **Regarding**

**House Bill 5040, An Act Concerning the Governor's Budget Recommendations for Human Services**

**Senate Bill 196, An Act Prohibiting Involuntary Discharges from Nursing Homes and Residential Care Homes to Temporary or Unstable Housing**

**March 1, 2022**

Good morning, Senator Moore, Representative Abercrombie and Members of the Human Services Committee. My name is Mag Morelli and I am the President of LeadingAge Connecticut. LeadingAge Connecticut is a membership association of 130 not-for-profit and mission-driven organizations representing the entire field of aging services and senior housing, including not-for-profit nursing homes and residential care homes. On behalf of LeadingAge Connecticut, I am pleased to testify on *House Bill 5040, An Act Concerning the Governor's Budget Recommendations for Human Services* and *Senate Bill 196, An Act Prohibiting Discharges from Nursing Homes and Residential Care Homes to Temporary or Unstable Housing*.

### **House Bill 5040, An Act Concerning the Governor's Budget Recommendations for Human Services**

LeadingAge Connecticut provided extensive testimony to the Appropriations Committee on the Governor's budget adjustment proposals related to the Department of Social Services which can be accessed through [this link](#). Today we are pleased to provide specific testimony on Section 4 of HB 5040.

LeadingAge Connecticut spoke to you last year about the deficiencies and inequities that exist in the current nursing home rate system, caused by years of disregarding the statutory rate formula. The inequities have disadvantaged many high-quality nursing homes, including the non-profit nursing homes we represent. The Legislature responded to our concerns and placed \$10 million in the biennial budget for nursing home facility support to be used for one-time grants to homes that had significant gaps between their calculated rates and their paid rates – and we thank you for that.

Subsequently, in developing the new acuity-based rate formula, the administration determined that this inequity in the existing rates should be permanently addressed in the new rate system. As a result, they are proposing to invest additional funding so that the rates can be rebased using the 2019 cost report year. This true rebasing will recognize allowable costs and increase the rates of nursing homes that have continually invested in their physical plant, services and workforce. The rebasing of the rates will require an additional investment of state and federal dollars over the three-year phase in of the new acuity-based rate system. The Governor has included \$12.8 million in the DSS budget adjustment proposal to support the first year of the rebasing, which we strongly support.

In the meantime, the \$10 million that was included in the budget for nursing home facility support is proposed to be used to fund a 10% temporary rate increase for the month of June – something that is urgently needed and greatly appreciated. This is the adjustment that you see in Section 4 of HB 5040 and we ask for your support.

## **Senate Bill 196, An Act Prohibiting Discharges from Nursing Homes and Residential Care Homes to Temporary or Unstable Housing**

This bill proposes to add an additional condition to the state statutes that govern the transfer and discharge of nursing home and residential care home residents. We believe that this additional language is unnecessary as the current state and federal statutes, along with current state supportive housing initiatives, are very comprehensive and cover the concerns this bill is attempting to address.

Regarding nursing homes, current comprehensive state and federal statutes governing transfer and discharge of residents encompass the many scenarios and conditions that may be the cause of a transfer or discharge, including the involuntary situations. In all cases, the health, safety and rights of the resident must be addressed. In addition, the statutes provide the resident with the right to appeal a proposed involuntary discharge.

The residential care homes must also address the health and safety of the resident when initiating an involuntary discharge or transfer and the resident has the right to appeal a proposed involuntary discharge.

We must keep in mind that in both settings, there are many reasons why a resident may be involuntarily transferred or discharged, including emergency situations when a resident might be highly disruptive or a danger to self or others. *We must be sure that any newly proposed legislation does not unintendedly prevent or stall transfers to another, more appropriate health care setting.*

We recognize that the ability to access and retain stable housing is a gap in our current health care continuum, and that gap is often inappropriately filled by a nursing home placement. The nursing home is then put into the difficult position of finding a stable housing placement when the resident is ready for discharge and the state is no longer willing to pay for the nursing home stay. Toward the goal of addressing this service gap, the state has developed the Connecticut Housing Engagement and Support Services (CHESS) Initiative and has incorporated the development of housing with services models in the ARPA HCBS Plan. We are hopeful that these initiatives will be of assistance to the residents of nursing homes and residential care homes who are in need of stable and supportive housing upon discharge.

In summary, we see no need to address this issue by making revisions to the transfer/discharge laws, which already include provisions to ensure that any transfer for or discharge is safe for the resident and also afford appeal rights for the resident.

Thank you for your consideration of our testimony and I would be happy to answer any questions.

Respectfully submitted,

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